Issue Classification

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| Application/Control No. | Applicant(s)/Patent Under Reexamination | | | | | | | |
|-------------------------|---|--|--|--|--|--|--|--|
| 10618640 | SUGIURA ET AL. | | | | | | | |
| Examiner | Art Unit | | | | | | | |
| Janis L Dote | 1795 | | | | | | | |

| 430 | CLASS | | | ORIGINAL | | | | | | | | INTERNATIONAL CLASSIFICATION | | | | | | | | | |
|--------------------|-----------|----------------|-----------|-----------|-------|-----|---|-----------------------|---------------------|---|--|------------------------------|--|-------------|--|--|--|--|--|--|--|
| 430 | | CLASS SUBCLASS | | | | | | CLAIMED | | | | | | NON-CLAIMED | | | | | | | |
| | 430 108.7 | | | G | 0 | 3 | G | 9 / 08 (2006.01.01) | | | | | | | | | | | | | |
| CDOSS DEFEDENCE(S) | | | | | С | 0 | 9 | С | 1 / 28 (2006.01.01) | | | | | | | | | | | | |
| CROSS REFERENCE(S) | | | | С | 0 | 1 | В | 33 / 113 (2006.01.01) | | | | | | | | | | | | | |
| CLASS | SU | BCLASS (O | NE SUBCLA | ASS PER B | LOCK) | | | | | | | | | | | | | | | | |
| 430 | 108.3 | 108.6 | 123.51 | | | | | | | | | | | | | | | | | | |
| 106 | 426 | 446 | 450 | 454 | 457 | | | | | | | | | | | | | | | | |
| 106 | 466 | 470 | 479 | 480 | 482 | | | 711 | | | | - | | | | | | | | | |
| 106 | 483 | 490 | | | | | | | | | | | | | | | | | | | |
| 423 | 327.1 | 331 | 335 | | | | | | | | | | | | | | | | | | |
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| ⊠ | Claims renumbered in the same order as presented by applicant | | | | | | | ☐ CPA ☐ T.D. ☐ R.1.47 | | | | | | | |
|-------|---|-------|----------|-------|----------|-------|----------|-----------------------|----------|-------|----------|-------|----------|-------|----------|
| Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
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| NONE | Total Claims Allowed: | | | | |
|--|-----------------------|---------------------|-------------------|--|--|
| (Assistant Examiner) | (Date) | 1 | 6 | | |
| /Janis L Dote/ Primary Examiner.Art Unit 1795 | 06/02/09 | O.G. Print Claim(s) | O.G. Print Figure | | |
| (Primary Examiner) | (Date) | 11 | None | | |